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County: Milwaukee Fac
HEARTLAND OF MILWAUKEE

3216 WEST HIGHLAND BOULEVARD

MI LWAUKEE 53208 Ownership: Corporati on Phone: (414) 344-6515 Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 88 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): 100 Average Daily Census: 75 Number of Residents on 12/31/00: 82

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%				
Home Health Care	No	Primary Diagnosis	 %	Age Groups	%	Less Than 1 Year	35. 4
Supp. Home Care-Personal Care	No					1 - 4 Years	34. 1
Supp. Home Care-Household Services	No	Developmental Disabilities	4. 9	Under 65	26. 8	More Than 4 Years	30. 5
Day Services	No	Mental Illness (Org./Psy)	29. 3	65 - 74	34. 1		
Respite Care	Yes	Mental Illness (Other)	23. 2	75 - 84	24. 4		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	20. 7	85 - 94	14. 6	***************	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.4	95 & 0ver	0.0	Full-Time Equivale	nt
Congregate Meals	No	Cancer	2. 4			Nursing Staff per 100 R	esi dents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	4. 9	65 & 0ver	73. 2		
Transportation	No	Cerebrovascul ar	0.0			RNs	6. 6
Referral Service	No	Diabetes	9.8	Sex		LPNs	14. 4
Other Services	Yes	Respi ratory	1. 2			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	1. 2	Male	45. 1	Aides & Orderlies	38. 4
Mentally Ill	No			Female	54. 9	1	
Provide Day Programming for			100.0				
Developmentally Disabled	No				100. 0	1	
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Method of Reimbursement

		Medi	care		Medi c	ai d											
		(Titl	e 18)		(Title 19)		0ther		P	Private Pay			Managed Care			Percent	
			Per Die	em		Per Die	m		Per Die	m		Per Dien	1]	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	. %	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0. 00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	_		\$200.00	72	96. 0	\$89.42	0	0. 0	\$0. 00	1		\$132.00	0	0. 0	\$0. 00 \$0. 00	79	96. 3%
Intermediate				3	4. 0	\$74.62	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	3	3. 7%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Personal Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Dev. Di sabl ed				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	6	100. 0		75	100. 0		0	0.0		1	100.0		0	0.0		82	100. 0%

HEARTLAND OF MILWAUKEE

***********	*****	********	******	*****	******	*********	******
Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	ions, Services,	, and Activities as of $12/3$	31/00
Deaths During Reporting Period							
					% Needi ng		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	17. 5	Daily Living (ADL)	Independent	0ne	or Two Staff	Dependent I	Resi dents
Private Home/With Home Health	3. 5	Bathi ng	9. 8		52. 4	37. 8	82
Other Nursing Homes	28. 1	Dressing	20. 7		52. 4	26. 8	82
Acute Care Hospitals	35. 1	Transferring	39. 0		40. 2	20. 7	82
Psych. HospMR/DD Facilities	7. 0	Toilet Use	25. 6		42. 7	31. 7	82
Rehabilitation Hospitals	0.0	Eati ng	40. 2		41. 5	18. 3	82
Other Locations	8.8	*********	*******	*****	*********	*********	*******
Total Number of Admissions	57	Continence		%	Special Treat	tments	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	4. 9	Recei vi ng	Respi ratory Care	2. 4
Private Home/No Home Health	28. 0	0cc/Freq. Incontinen	t of Bladder	53. 7	U	Tracheostomy Care	0. 0
Private Home/With Home Health	2.0	0cc/Freq. Incontinen	t of Bowel	48.8	Recei vi ng	Sucti oni ng	0. 0
Other Nursing Homes	6. 0				Recei vi ng	Ostomy Care	0. 0
Acute Care Hospitals	48. 0	Mobility			Recei vi ng	Tube Feeding	8. 5
Psych. HospMR/DD Facilities	4.0	Physically Restraine	ed	8. 5	Recei vi ng	Mechanically Altered Diets	47. 6
Rehabilitation Hospitals	0.0						
Other Locations	0.0	Skin Care			Other Residen	nt Characteristics	
Deaths	12. 0	With Pressure Sores		4. 9	Have Advan	ce Directives	0. 0
Total Number of Discharges		With Rashes		0.0	Medi cati ons		
(Including Deaths)	50				Recei vi ng	Psychoactive Drugs	31. 7

		Ownershi p: Propri etary		Bed	Si ze:	Li ce	ensure:		
	Thi s			100-	199	Ski l	lled	All Facilities	
	Facility	Peer	Peer Group		Group	Peer	Group		
	%	%	Ratio	%	Ratio	%	Rati o	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	75. 0	74.6	1. 00	83. 3	0. 90	81. 9	0. 92	84. 5	0.89
Current Residents from In-County	100	84. 4	1. 18	85.0	1. 18	85. 6	1. 17	77. 5	1. 29
Admissions from In-County, Still Residing	50 . 9	20. 4	2. 50	19. 2	2. 65	23. 4	2. 17	21.5	2. 37
Admi ssi ons/Average Daily Census	76. 0	164. 5	0. 46	196. 7	0. 39	138. 2	0. 55	124. 3	0. 61
Discharges/Average Daily Census	66. 7	165. 9	0.40	194. 3	0. 34	139. 8	0.48	126. 1	0. 53
Discharges To Private Residence/Average Daily Census	20. 0	62. 0	0. 32	76. 2	0. 26	48. 1	0. 42	49. 9	0.40
Residents Receiving Skilled Care	96. 3	89. 8	1. 07	91. 2	1.06	89. 7	1.07	83. 3	1. 16
Residents Aged 65 and Older	73. 2	87. 9	0.83	93. 9	0. 78	92. 1	0.79	87. 7	0.83
Title 19 (Medicaid) Funded Residents	91. 5	71. 9	1. 27	60. 4	1. 52	65. 5	1. 40	69. 0	1. 33
Private Pay Funded Residents	1. 2	15. 0	0. 08	26. 5	0.05	24. 5	0.05	22. 6	0.05
Developmentally Disabled Residents	4. 9	1. 3	3. 69	0.6	7. 79	0. 9	5. 48	7. 6	0.64
Mentally Ill Residents	52. 4	31. 7	1.65	26. 6	1.97	31. 5	1. 67	33. 3	1. 57
General Medical Service Residents	1. 2	19. 7	0. 06	22. 9	0.05	21.6	0.06	18. 4	0.07
Impaired ADL (Mean)	50. 5	50. 9	0. 99	48. 7	1.04	50. 5	1.00	49. 4	1.02
Psychological Problems	31. 7	52. 0	0.61	50. 4	0. 63	49. 2	0.64	50. 1	0. 63
Nursing Care Required (Mean)	7. 9	7. 5	1.05	7. 3	1.09	7. 0	1. 13	7. 2	1. 11